PART B - FEE(S) TRANSMITTAL

Complete and Fee this form, together with applicable fee(s				Mail Stop IS Commission P.O. Box 14: Alexandria, (571)-273-28			
INSTRUCTIONS! This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee holitocation.							
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic Fee(s) Transmittal. This certificate cannot be used for any other papers. Each additional paper, such as an assignment or format have its own certificate of mailing or transmission.							or domestic mailings of the for any other accompanying
Certificate of Mailing or Transmission MACMILLAN, SOBANSKI & TODD, LLC ONE MARITIME PLAZA - FOURTH FLOOR 720 WATER STREET TOLEDO ON 43 (04)							
TOLEDO, OH 430	04/03/2006 CNEG	1400.00 DA 300.00 DA	36605 10690247	Kathu	M. Bro 2006	m. Meur	(Depositor's name) (Signature) (Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INV		ITOR (AT	TORNEY DOCKET NO.	CONFIRMATION NO.
10/690,247 10/21/2003 James A. Duggan 1-5222 3417 TITLE OF INVENTION: ELASTOMERIC COUPLING FOR ROTATING SHAFTS							
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE P	JBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	nonprovisional NO \$1400			\$300		\$1700	06/13/2006
EXAMINER		ART UNI	т с	CLASS-SUBCLASS			
BINDA, GREGORY JOHN 3679 464-069000							
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 MacMillan, Sobanski & Todd, LLC 2 3						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Torque-Traction Technologies LLC Maumee, Ohio							
Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s) are enclosed: The following fee(s) are enclosed: Ab. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-0005 (enclose an extra copy of this form).							
5. Change in Entity Status	(from status indicated above MALL ENTITY status. See	•	☐ h Annlicent is n	a langer alaiming	CMALLE	NTITY status. See 37 C	FD 1 27(a)(2)
• •			• •				ation identified above. he assignee or other party in
Authorized Signature	Puhan Solh	athla		Date	3/31,	/2006	
	Richard S. Mac					30,085	
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							